

# Announced Premises Inspection Report 24 May 2016



## **MULHERN CLOSE**

**Service Type: Residential Care Home**

**Address: 58 Coolnagard Avenue, Omagh, BT78 1GA**

**Tel No: 028 8225 0382**

**Inspector: Raymond Sayers**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An announced premises inspection of Mulhern Close took place on 24 May 2016 from 10.15 to 12.45hrs.

### Is care safe?

On the day of the inspection the premises supported the delivery of safe care. Refer to section 4.3.

### Is care effective?

On the day of the inspection the premises supported the delivery of effective care. There were however some issues identified for attention by the registered person. Refer to section 4.4.

### Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. Refer to section 4.5

### Is the service well led?

On the day of the inspection the management of the premises was considered to be well led. Refer to section 4.6

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes Minimum Standards 2011:

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	4

Details of the QIP within this report were discussed with Ms Kerri Lowry, Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

## 1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

## 2.0 Service Details

<b>Registered organisation/registered person:</b> Inspire Wellbeing Ltd	<b>Registered manager:</b> Kerri Lowry
<b>Person in charge of the home at the time of inspection:</b> Kerri Lowry	<b>Date manager registered:</b> 03 August 2015
<b>Categories of care:</b> RC-LD, RC-LD(E)	<b>Number of registered places:</b> 12

## 3.0 Methods/processes

Prior to inspection the following records were analysed: Previous estates inspection report, statutory notifications over the past 12 months and the duty call log.

During the inspection the inspector met with: two residents; Mrs Kerri Lowry; Registered Manager, the Maintenance Manager, Mrs Wendy Knox; and kitchen staff.

The following records were examined during the inspection: Copies of building services certificates, building user log books relating to maintenance inspections of building engineering services, legionellae risk assessment, and fire risk assessment.

## 4.0 The Inspection

### 4.1 Review of requirements and recommendations from the previous inspection dated 15/12/2015

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned, and approved by the care inspector on 19 February 2016. This QIP will be validated by the care inspector at their next inspection.

#### 4.2 Review of requirements and recommendations from the last premises inspection dated 24/01/2014

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> <b>Ref:</b> Regulation 27(2)(d) <b>Stated:</b> First time	<p>Complete a decoration condition survey of all interior decorated surfaces; implement a scheduled redecoration to repair damaged/deteriorated surfaces.</p> <p><b>Action taken as confirmed during the inspection:</b> All accommodation reviewed was well decorated.</p>	<b>Met</b>
<b>Requirement 2</b> <b>Ref:</b> Regulation 27(2)(b) <b>Stated:</b> First time	<p>Remove screws protruding from Block C living room wall surface.</p> <p><b>Action taken as confirmed during the inspection:</b> Screw fixings removed from wall.</p>	<b>Met</b>
<b>Requirement 3</b> <b>Ref:</b> Regulation 14(2)(a)(b) & (c) <b>Stated:</b> First time	<p>Hoisting equipment must be subjected to valid Lifting Operations and Lifting Equipment Regulations (Regulation 9) thorough examination inspection and deemed "fit for purpose" prior to any proposed use on the premises.</p> <p><b>Action taken as confirmed during the inspection:</b> The hoisting equipment has not been used, if there was a requirement to utilise the equipment then procedures are in place to obtain the statutory compliance.</p>	<b>Met</b>
<b>Requirement 4</b> <b>Ref:</b> Regulation 14(2)(a)(b) & (c) <b>Stated:</b> First time	<p>Verify that the electrical installation BS7671 periodic inspection certificate is currently valid and that the system is compliant with Regulation 4 of the Electricity at Work Regulations</p> <p><b>Action taken as confirmed during the inspection:</b> The requirement was satisfied by the submission of the appropriate certificate.</p>	<b>Met</b>

<p><b>Requirement 5</b></p> <p><b>Ref:</b> Regulation 14(2)(a)(b) &amp; (c)</p> <p><b>Stated:</b> First time</p>	<p>Verify that the Thermostatic Mixing Valves are maintained periodically to ensure compliance with `safe` hot water/surfaces and legionella risk assessments.</p> <p><b>Action taken as confirmed during the inspection:</b> Compliance certificates submitted.</p>	<p><b>Met</b></p>
<p><b>Requirement 6</b></p> <p><b>Ref:</b> Regulation 27(4)(d)</p> <p><b>Stated:</b> First time</p>	<p>Submit verification copies of the BS5839 fire detection and alarm system maintenance certificates completed for the twelve month period prior to 24 January 2014.</p> <p><b>Action taken as confirmed during the inspection:</b> Verification certificates submitted.</p>	<p><b>Met</b></p>
<p><b>Requirement 7</b></p> <p><b>Ref:</b> Regulation 27(4)(c)(d)</p> <p><b>Stated:</b> First time</p>	<p>Submit a verification copy of the BS5266 emergency lighting annual maintenance/test certificate completed in the twelve month period prior to 24 January 2014.</p> <p><b>Action taken as confirmed during the inspection:</b> Verification certificate submitted.</p>	<p><b>Met</b></p>
<p><b>Requirement 8</b></p> <p><b>Ref:</b> Regulation 27(4)(a)</p> <p><b>Stated:</b> First time</p>	<p>Record and verify works actions/procedures completed on the fire risk assessment works action plan.</p> <p><b>Action taken as confirmed during the inspection:</b> Remedial actions implemented.</p>	<p><b>Met</b></p>
<p><b>Requirement 9</b></p> <p><b>Ref:</b> Regulation 27(4)(a)(c) &amp; (f)</p> <p><b>Stated:</b> First time</p>	<p>Display a fire precaution/evacuation floor plan detail adjacent the fire detection and alarm panel.</p> <p><b>Action taken as confirmed during the inspection:</b> Floor plan displayed.</p>	<p><b>Met</b></p>

Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 28.1 & 28.3 <b>Stated:</b> First time	Legionella risk assessment document should be reviewed and amended, inserting the correct address/title.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Legionella Risk assessment document reviewed.	
<b>Recommendation 2</b> <b>Ref:</b> Standard 28.1 <b>Stated:</b> First time	Portable electrical appliance testing records must be maintained and available for examination on the premises.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Portable Appliance Test records available for review.	
<b>Recommendation 3</b> <b>Ref:</b> Standards 28.1 & 28.2 <b>Stated:</b> First time	Submit verification that the emergency generator installation is maintained and tested in accordance with the manufacturer's recommendations/instructions.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Emergency generator maintained.	
<b>Recommendation 4</b> <b>Ref:</b> Standard 28.1 <b>Stated:</b> First time	Review the health and safety risk assessment relating to window casement opening restriction and consider installing restriction devices which are fixed to the framing by use of a specialist tool, preventing unauthorized window casement opening beyond a 100mm maximum distance from framing.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Window restrictors maintenance regime subjected to Health and Safety review.	

### 4.3 Is care safe?

A range of building services maintenance documents were presented for review during this estates inspection. This documentation included: risk assessments, inspection and test reports for various elements of the engineering services.

Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this estates inspection.

A range of fire protection measures are in place for the premises, this includes: a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape.

The standard used by the registered person to determine the level of fire safety within the premises takes account of: the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment, which was completed by a risk assessor holding professional body registration for fire risk assessors.

This supports the delivery of safe care.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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### 4.4 Is care effective?

There are arrangements in place for routine premises management plus emergency break-down repairs. Service users are involved, where appropriate in decisions around the redecoration and maintenance of the premises.

A number of issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

#### Areas for improvement

1. An emergency lighting BS5266 six monthly inspection/test was completed on 20 May 2016; a number of emergency lighting units were listed as having failed the 3 Hour test, and are to be replaced Choice Housing Maintenance Manager states the replacement works order has been issued.

Refer to QIP recommendation 1.

2. The fire detection and alarm system was subjected to a BS5839 inspection by an engineer on 20 May 2016; Evidence was not presented to verify that the fire detection and alarm system was subjected to maintenance inspections at intervals compliant with BS5839. (ie. six monthly maximum interval).

Refer to QIP recommendation 2.

3. The BS7671 Periodic Inspection Report for the electrical installation was not available for examination. The `Choice` Maintenance manager stated that this would be completed by 3 June 2016.

Refer to QIP recommendation 3.

4. The Legionella risk assessment report dated 13 May 2016 has determined the risk rating as high. The Choice Housing Maintenance Manager, Damien Tai stated in correspondence by e-mail following the inspection on 14 June 2016 that HBE are now implementing the risk assessment recommendations, and this has been confirmed by e-mail by `Choice Housing Association` maintenance manager.
5. Damp penetration had occurred in a store room containing electrical controls. The damp is penetrating from en-suite shower-rooms in bungalow D bedrooms 2 and 4. The registered manager stated that this defect would be investigated and resolved.

Refer to QIP recommendation 4.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>4</b>
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**4.5 Is care compassionate?**

The accommodation reviewed during this premises inspection was well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor and the private accommodation where appropriate. The service users consulted expressed satisfaction with the standard of the environment within the home.

This supports the delivery of compassionate care.

There were no areas identified as requiring improvement during the inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 4.6 Is the service well led?

Premises related policies and documents are retained, and are accessible to relevant persons.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

There were no items requiring improvement identified for attention during this premises inspection.

<b>Number of requirements</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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#### 5.0 Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Kerri Lowry, Registered Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

#### 5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/manager meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005.

## 5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

## 5.3 Actions taken by the registered manager/registered person

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person should review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP should be returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered person/manager from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered person/manager with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

## Quality Improvement Plan

Recommendations	
<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 29.2</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 19 July 2016</p>	<p>The registered person should confirm that the emergency lighting installation remedial works are completed.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> The Emergency lighting installation remedial work was completed on 30<sup>th</sup> June 2016 by BPS.</p>
<p><b>Recommendation 2</b></p> <p><b>Ref:</b> Standard 29.2</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 19 July 2016</p>	<p>The registered person should confirm that the fire detection and alarm system maintenance regime is completed with inspection intervals compliant with BS5839.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Service contract is in place for fire alarm servicing and this is compliant with BS5839. The fire detection and alarm systems are serviced bi-annually and when required.</p>
<p><b>Recommendation 3</b></p> <p><b>Ref:</b> Standard 28.1</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 19 July 2016</p>	<p>The registered person should confirm that the BS7671 periodic inspection of the electrical installation has been completed and that the electrical system is compliant with Electricity at Work Regulation 4.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> The BS7671 periodic inspection of the electrical installation has been completed on 9<sup>th</sup> June 2016 and the electrical system is compliant with Electricity at Work regulation 4. A copy of the certificate has been sent to RQIA on 29<sup>th</sup> June 2016.</p>
<p><b>Recommendation 4</b></p> <p><b>Ref:</b> Standard 27.1</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 19 July 2016</p>	<p>The registered person should confirm that the damp penetration defect is rectified.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> The shower valves in bedrooms D2 and D4 have been repaired and the water penetration into the cupboard has been checked with a damp metre and is drying out, once this has dried out the spoilt plaster will be rubbed down and repaired.</p>



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